



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)

## Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☒ No

### COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) ☐ Check if this is a new name

William Tyrrell Giles

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

( 317 ) 918-0369

4. Mailing Address (address where all campaign finance correspondence is received) ☒ Check if this is a new address

6845 Meadow View Dr

5. City, State, ZIP Code

Indianapolis, Indiana 46226

6. Party Affiliation (if applicable)

Democrat

### CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)

William Tyrrell Giles

9. Office Sought (include district number, if any. Not required for exploratory committee.)

Lawrence Common Council District 1

8. Party Affiliation or If Independent Candidate

Democrat

10. County of Residence

Marion

### TYPE OF REPORT

11. Check one:

☐ Pre-Primary ☐ Pre-Election ☒ Annual ☐ Nomination ☐ Other  
☐ Final/Disbands Committee (lines 18, 19, and 20 must be "0") ☐ Outgoing Treasurer (within 10 days amend Statement of Organization)

### CONVENTION CANDIDATES ONLY

Check one:

☐ Pre-Convention  
☐ Post-Convention

12. Reporting Period:

From: October 10<sup>th</sup> 2015

Through: December 31, 2015

COLUMN A  
This Period

3163.00

COLUMN B  
Year to Date

0

13. Cash on hand and investments at the beginning of this reporting period.

14. Cash on hand and investments January 1, current year.

### CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)

0

15b. Unitemized

0

SUBTOTAL

0

15c. Add lines 15a and 15b in both columns

TOTAL

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

### EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

1083.13

17b. Unitemized

0

SUBTOTAL

1083.13

17c. Add lines 17a and 17b in both columns

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

TOTAL

2005.41

19. Debts OWED BY the committee (use Schedule D)

1800.00

20. Debts OWED TO the committee (use Schedule E)

### CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer

Title

Date

Signature of Candidate (if applicable)

Date

01/20/16

FOR OFFICIAL USE ONLY  
**FILED**

JAN 20 2016

9:30 AM  
Myra A. Eldridge



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## (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

FILE NUMBER

Page \_\_\_\_\_ of \_\_\_\_\_

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code _____ Fine Promotions 8156 Zionsville Rd Indianapolis, In 45268		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: Yard signs	219.35		11/02/15
Code _____ Sam's Club 7235 E.96 <sup>th</sup> St.		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Cash Donation _____ Purpose:	53.99		11/03/15
Code _____ Subway 9155 E.56 <sup>th</sup> St. Indianapolis, IN 46216		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: Campaign Food	145.79		11/04/15
Code _____ Staples		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose: Contribution	74.52		10/26/15
Code _____ Post office		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	125.00		10/26/15
Code _____ Ball Park Communications		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other _____ Purpose:	240.00		10/28/15
Code _____		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution			

		Other Purpose:			
SUBTOTAL THIS PAGE OF SCHEDULE B			\$1083.13		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$1083.13		

## INSTRUCTIONS FOR COMPLETING THIS FORM

**FILE NUMBER:** Enter the file number assigned by the Election Division or County Election Board. Also indicate the number of pages used to complete this schedule. For example, "Page 2 of 2." This means that this page is second page of two pages used for this schedule.

**RECIPIENT'S NAME AND MAILING ADDRESS:** Enter the full name and mailing address of each person or vendor to whom one (1) or more disbursements in an aggregate amount exceeding \$100 (\$200 if regular party committee) have been made.

### ALSO

Enter the full name and mailing address of each political committee that has received a transfer-out from the reporting committee. The reporting requirement of a transfer-out from a political committee is different from the reporting requirement of an expenditure to a person. Each transfer-out, regardless of amount, must be itemized.

**NOTE:** Under normal circumstances, you should not list a credit card issuer as a recipient. If making a payment on a credit card, list vendor, NOT the credit card company. Also note that any unpaid credit obligation should be listed on Schedule D, "Debts Owed By This Committee."

**EXPENDITURE CODES:** In the box at the upper left corner of the "Recipient's Name and Mailing Address" section, enter the expenditure code for each entry from the following list of codes:

**Code:** C  
**Expenditure Type: Contributions**

**Expenditure Definition:** Direct and in-kind contributions the campaign can legally make to other campaigns, political action committees, community and charitable organizations. In the description column, the filer is directed to specify who benefited and, if in-kind, what was purchased.

**Code:** F  
**Expenditure Type: Fundraising**

**Expenditure Definition:** Expenditures, direct or in-kind, associated with holding a fundraiser, including payments to restaurants, hotels and caterers, other food and refreshment vendors, entertainers, and speakers.

*\*Filers are directed to use an "A" for expenditures for printed matter produced in connection with fundraising events.*

**Code:** A  
**Expenditure Type: Advertising**

**Expenditure Definition:** Expenditures associated with the production, design, photography, copy, layout, printing, reproduction and purchase of advertising and campaign communications including:

- Radio and television advertising
- Advertising in newspapers, periodicals, and other publications
- Advertising on billboards and yard signs
- Campaign paraphernalia such as buttons, bumper stickers, T-shirts, hats, etc.

- Websites
- Campaign literature
- Printed solicitations
- Fundraising letters
- Mailing lists

**Code:** O  
**Expenditure Type: Operations**

**Expenditure Definition:** General campaign operating expenses and overhead including:

- Wages, salaries and benefits associated with hiring campaign employees and other paid workers who provide miscellaneous services
- Contracts, fees, and commissions paid to campaign management companies and contract consultants including law firms
- Headquarters purchase or rental
- Utilities
- Purchase or rental of office equipment and furniture for the campaign
- Surveys and Polls – including expenditures associated with the design and production of polls, election trend reports, voter surveys, telemarketing, telephone banks, Get Out The Vote drives, etc.
- Postage – including stamps, or metered postage, direct mail services and delivery services like United Parcel Services and Federal Express
- Travel – including fares, accommodations, and meals from campaign trips

**RECIPIENT'S OCCUPATION/OFFICE SOUGHT:** Enter the recipient's occupation, and if applicable, the office sought. For example, "printer" or "candidate, State Representative District 5."

**TYPE OF EXPENDITURE:** Check the type of expenditure. For "other", describe the type of expenditure.

**PURPOSE OF EXPENDITURE:** Enter the purpose of the expenditure or transfer-out. Be specific. Indicate any reimbursement.

**COLUMN A AMOUNT THIS PERIOD:** Enter the amount of each expenditure and transfer-out, including in-kind for this reporting period.

**COLUMN B CUMULATIVE YEAR-TO-DATE:** Enter the cumulative expenditure and transfer-out, including in-kind for calendar year-to-date.

**On the first report of each calendar year, the entry in Column B is the same as the entry in Column A.**

**DATE OF EXPENDITURE:** Enter the month, day, and year of the expenditure or transfer-out. Use the following guidelines to determine the proper date to use:

**FOR USE**

Payment of bill The date the bill was actually paid (by placing a check in the mail or tendering cash in person).



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**(CFA-4 SCHEDULE D)  
DEBTS OWED BY THIS COMMITTEE**

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, **OWED BY** the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page \_\_\_\_\_ of \_\_\_\_\_

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS <i>(street, number, city, state, ZIP code)</i>	ENDORSEER'S OR VENDOR'S NAME & MAILING ADDRESS <i>(if any)</i> <i>(street, number, city, state, ZIP code)</i>	AMOUNT  NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
William T. Giles 6845 Meadow View Dr. Indianapolis, Indiana 46226		Loaned 1800.00	02/04/15	1800.00	1800.00
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
SUBTOTAL THIS PAGE OF SCHEDULE D					\$1800.00